

Karen C. Handel Secretary of State

STATE OF GEORGIA SECURITIES AND BUSINESS REGULATION 2 Martin Luther King Jr. Drive, S.E. Suite 802 West Tower Atlanta, Georgia 30334 (404) 656-3920

Robert D. Terry Division Director

REPORT AND ITEMIZED LIST OF ALL UNSERVICED PRENEED FUNERAL CONTRACTS AS OF 12/31/200__

Please read instructions accompanying this form. This report is mandated by O.C.G.A. 10-14-12(g). PART 1 - GENERAL **Registration Number** Total number of unserviced Phone Number contracts as of 12-31-200_ Name of Registrant/Funeral Home Mailing Address Zip Code City State Location of Records City State Zip Code Name and phone number of contact person regarding this report: PART II - UNSERVICED PRENEED FUNERAL CONTRACTS Contract Holder Name and Depository Date of Contract Total Amount Amount Total Amount Bank Account Number Contract Number of Contract Paid to Date on Deposit TOTAL (Page 1) TOTAL (Page 2) **TOTAL OF ALL PAGES**

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Contract Holder Name and	Depository	Date of	Contract	Total Amount	Amount	Total Amount	
Bank Account Number		Contract	Number	of Contract	Paid to Date	on Deposit	
Attach additional pages, as ne	ecessary, with complete info	rmation as above	on every cont	ract holder.			
	•			D PRENEED FUNER.	AL CONTRACTS		
Contract Holder Name and	Depository	Date of	Contract	Total Amount	Amount	Total Amount	
Bank Account Number		Contract	Number	of Contract	Paid to Date	on Deposit	
TOTAL (Page 2)		•	•	•			
Attach additional pages, as necessary, with complete information as above on every contract holder							
PART III - CERTIFICATION							
I hereby certify, under penalt						hed	
hereto are true and correct to							
to the preneed escrow accou	nt. I am authorized to sign	this document or	n behalf of the	individual or corpora	te owner.		
Signature:				Print Name:	Print Name:		
Title				Date	Date		
•				•			

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